

DMH/DD/SAS Standards for LME Qualification for Single Stream Funding for SFY 08 and SFY 09

Effective October 1, 2007

In order for a Local Management Entity (LME) to qualify for designation by the Department of Health and Human Services for single stream funding for SFY 08 or SFY 09 after October 1, 2007 the LME shall submit a written request for single stream funding status to the Division of MH/DD/SAS (Division) for SFY 08 or SFY 09 and shall include copies of information required in item #5 below, along with a statement of assurances relative to items #8, #9, and #10 below. The Division shall have the information on the other items.

1. An LME written request for designation for single stream funding for SFY 08 or SFY 09 has been submitted to the Division no earlier than six (6) weeks, and no later than four (4) weeks, prior to the beginning of the next fiscal quarter in order for the LME to be considered for designation for single stream funding for the beginning of the fiscal quarter. An LME that meets the standards for qualification for single stream funding for FY 08 or for SFY 09 shall be designated for participation and transitioned at the beginning of the next fiscal quarter following the LME's designation; and
2. The LME has an approved Performance Contract with the Division for SFY 08 that was signed after September 1, 2007, and that extends through June 30, 2008, or for SFY 09 that extends through June 30, 2009; and
3. The LME has a current LME Crisis Plan that has been approved in writing by the Division; and
4. The LME does not have an unresolved notice to the area authority board, county program, and the board(s) of commissioners related to the conditions set forth in G.S. 122C-124.1 and/or G.S. 122C-125 ; and
5. The LME submits to the Division a current signed SFY 08 or SFY 09 addendum to the agreement between the Consumer and Family Advisory Committee (CFAC) and the governing board of the area authority or county program that outlines the role of the CFAC in the LME age/disability service planning process relative to the use of funds. This addendum to the agreement shall also include the communication and reporting expectations between the LME and the CFAC in regards to the LME's participation in single stream funding for SFY 08 and/or SFY 09. In the event the LME governing board does not currently have an agreement with the CFAC to amend, the LME must submit an agreement which, at a minimum, addresses the role of the CFAC in the age/disability service planning process relative to the use of funds and include the communication and reporting expectations between the LME and the CFAC in regards to the LME's participation in single stream funding; and
6. The LME has demonstrated total Integrated Payment and Reporting System (IPRS) earnings through claims payment of a minimum of 85% of the LME's annual service funds that are allocated within UCR for SFY 07 (as measured following the 4th quarter of SFY 07) or for SFY 08 (as measured following the 3rd quarter of SFY 08 or through the last IPRS check-write in SFY 08); and
7. The LME has met or exceeded identified performance benchmarks for a minimum of 65% of the designated performance measures* that are contained in the appropriate Performance Contract that was in effect for the LME for the fiscal report quarter that is the basis for evaluation (as measured for SFY 08 following the 1st or 2nd report quarter of SFY 08, or for SFY 09 following the 3rd or 4th report quarter of SFY 08 or the 1st or 2nd report quarter of SFY 09); and
8. The LME has provided written assurances that:
 - It shall continue to enroll all individuals into the appropriate target population groups and will report service units on a monthly basis to IPRS; and
 - Reporting to IPRS shall contain accurate and complete content to allow accounting for a minimum of 85% of recurring allocated funds through a combination of (a) claims payment through the appropriate source of Federal funds not included in single stream funding and (b) processing of claims receiving a claims payment with a \$0 value with a new EOB to be determined; and
 - It shall provide a complete and satisfactory accounting of all non-UCR expenditures; and
9. The LME has provided written assurance that it shall use Division funding only to purchase services included in the IPRS service array except as provided herein. If the LME desires to provide services not included in the IPRS service array, the LME shall submit information to the DMH/DD/SAS Budget and Finance Team in order to receive approval, in consultation with the Community Policy Management Section, and to develop a reporting code and appropriate rate for the approved new service. Such information provided to the Budget and Finance Team shall include (a) designation of the new service and population to which the new service is to be made available, and (b) cost information sufficient for the Budget and Finance Team, in conjunction with the DHHS Controller's Office, to establish a rate; and
10. The LME has provided written assurance that it shall meet or exceed the Division designated local Maintenance of Effort (MOE) requirements for state only funding by LME for SFY 08 in accordance with the Division's federal mandates in the current applicable Substance Abuse Prevention and Treatment Block Grant (SAPTBG) and the Mental Health Block Grant (MHBG). The local MOE requirement for SFY 08 for substance abuse treatment services, women's substance abuse services, community mental health treatment services, and children's community mental health services, is defined as the amount of State funding allocated in SFY 07 or SFY 08, with adjustments in State funding, including any increases or decrease, for SFY 08 or SFY 09.

* For an LME making application for single stream under the SFY 07 Performance Contract, this evaluation shall include six (6) designated measures, including three measures of services access, two measures of state facility follow-up, and one composite measure of data submission. For an LME making application for single stream under the SFY 08 Performance Contract, this evaluation shall include twenty-one (21) designated measures, including measures of services access, treated prevalence, service initiation, service engagement, state hospital readmission, state facility follow-up, use of child residential services, and data submission.